## $m{C}$ alifornia $m{P}$ rison Health Care $m{R}$ eceivership Office of the Receiver

Date: 24 August 2006 To: San Quentin Staff

From: Robert Sillen, Receiver

Re: Project Update: Putting San Quentin Under a Microscope

As you may know, one of the first efforts of the new federal Receivership is a project to improve medical care at San Quentin, which is currently underway at your institution. The effort is not intended to achieve a comprehensive fix of San Quentin's medical system but, rather, to deliver immediate relief in the clinical trenches and pave the way for on-going improvements in the future. The SQ project began on July 5 and is expected to last approximately 90 days. Some of the work initiated by my team will take place during that timeframe. Other items will be planned, and unfold over time, such as new building construction.

The commitment and creativity of many members of the San Quentin staff to this project has been outstanding. They have been integrally involved in defining problems, developing solutions and carrying out improvements. Their extra hard work deserves recognition, and it will be crucial to the achievement of meaningful change.

The SQ Project Team includes members of the <u>Receiver's staff</u> -- including the Chief of Staff, Director of Custody Support Services, Chief Medical Officer and Director of Facilities Engineering. <u>San Quentin medical and custody staff</u> also are involved, including the Chief Medical Officer, Warden and Associate Warden for Health Care. In addition, we have brought in leadership from the <u>CDCR Division of Correctional Health Care Services</u>, including the Regional Director of Nursing.

## What has happened so far?

In the past several weeks, people have been working very hard to address fundamental areas of medical care delivery – such as the organization and culture of nursing, the proper roles for clinical and non-clinical support staff — always with attention sharply focused on the goal of improving the quality of care delivered to inmate patients. Here are some highlights of the work to date.

- Facilities maintenance and improvements.
  - o The Project team has hired casual union labor to paint clinical space, patch holes in walls and ceilings and make needed, overdue repairs.
- Access to specialty care improved, back log reduced.

- o The Project team identified 108 patients with urgent specialty referrals that had not been seen some delays as long as two years. Those patients started going out to appointments the week of August 7.
- Patient advocate program launched.
  - The Project team hired a Nurse (RN) Patient Advocate to conduct same-day clinical review of patient medical appeals and to provide immediate urgent medical care as necessary.
- Hiring new clinical and administrative staff to achieve a more efficient, responsive, and better equipped medical care delivery system.
  - The Receiver authorized hiring of the following positions, which is currently underway: Office Technicians, Office Assistants, Medical Records Technicians, Property Controller, Materials & Stores Supervisors (I and II), Stock Clerk, Staff Information Systems Analyst, Custodians, Registered Nurses, and an analyst for the SQ Personnel Office to speed up hiring clinical staff.
- Reception center physicals moved to appropriate clinical space.
  - O Physical exams for reception center inmate patients now take place in private, medically equipped exam rooms on the third floor of the Neumiller building. Previously they were held in a portion of the non-private, ill-equipped waiting room.
- Major reorganization of the medical supplies system.
  - O San Quentin now has a staff person responsible for medical supplies ordering, storage and inventory. In addition, the process for ordering non-emergency medical supplies has been revamped, cutting out several unnecessary and time consuming bureaucratic steps. Previously, staff endured a six-day ordering process, and a nine-day procurement process, followed by a week to month wait for delivery. Now, the ordering takes one day, the procurement process has been eliminated, and delivery arrives one to 30 days later.
- Laboratory services faster, backlog reduced.
  - San Quentin's lab has instituted a new policy of completing all ordered blood draws in 72 hours or sooner. Two new lab assistants have been hired, and the backlog of overdue lab tests has been eliminated.
- Medical records staffing improved, backlog reduced.
  - The medical records department has hired 13 new staff and will soon begin recruiting for a Medical Records Director. By providing coverage for both second and third watch, the newly reorganized medical records department no longer has a backlog of loose filing, and charts are pulled for the next day's appointments the night before.

## What is still to come?

- Housing block and reception center clinics to be replaced by a new medical building that will combine the functions of several clinics and house lab, X-Ray, pharmacy, medical records, primary, specialty and urgent care together under one roof, creating an up to date, adequate, quality clinical environment.
- Medical supplies and equipment will be consolidated into a new warehouse for that purpose, streamlining procurement, inventory and delivery.
- Determination of the appropriate clinical function and future use of the current Out-Patient Housing Unit (OHU).

## **Problems encountered**

- San Quentin physical plant structure is old and not wired for computer use. As a result, many staff members do not have the computer equipment they need to do their jobs well. Asbestos and lead-based paint in walls make wiring hazardous. We are currently evaluating next steps.
- Many of the changes the Project team is pursuing require significant shifts in work loads and performance expectations. This can be a difficult transition for staff, and requires time for adjustment. The transformation of San Quentin's medical delivery services will not be instantaneous.

We will continue to provide you with updates on the Project as it develops. Congratulations on making significant first steps toward a quality medical care system for inmate patients.